



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.: 10/646,601
Filing Date: 08/21/2003
Applicant: William Lo et al.
Group Art Unit: 2154
Examiner: Mohammad A. Siddiqi
Title: MULTI-SPEED SERIAL INTERFACE FOR MEDIA
ACCESS CONTROL AND PHYSICAL LAYER
DEVICES
Attorney Docket: MP0290

Mail Stop Issue Fee
Director of the United States Patent and Trademark Office
P.O. Box 1450
Alexandria, VA 22313-1450

COMMENTS ON STATEMENT OF REASONS FOR ALLOWANCE

Reasons for allowance are only warranted in instances in which "the record of the prosecution as a whole does not make clear the Examiner's reasons for allowing a claim or claims." 37 C.F.R. 1.104(e). In the present case, Applicants believe that the record as a whole makes clear the reasons for allowance and therefore no statement by the Examiner is necessary or warranted. Therefore, the record should reflect that Applicants do not necessarily agree with the statement in the reasons for allowance.

For example, the Examiner loosely paraphrases portions of various claims in the Statement of Reasons for Allowance. The quoted language may not

exactly correspond to any of the allowed independent claims.

Applicant's claims should be limited only by the terms utilized therein. Thus, Applicants hereby submit these Comments in an effort to ensure that the claims are properly construed based only upon limitations that are actually present therein and/or to ensure that the claims are not interpreted so as to include any additional claim limitations that are not found in the respective claims.

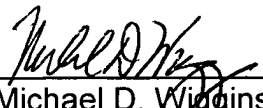
Additionally, Applicants do not necessarily agree with the Examiner to the extent that the Examiner has commented on what the prior art shows or does not show in the Statement of Reasons for Allowance.

Should there be any outstanding matters that need to be resolved in the present application the Examiner is respectfully requested to contact the undersigned. If necessary, the Commissioner is hereby authorized in this, concurrent, and future replies, to charge payment or credit any overpayment to Deposit Account No. 08-0750 for any additional fees required under 37 C.F.R. § 1.16 or under 37 C.F.R. § 1.17; particularly, extension of time fees.

Respectfully submitted,

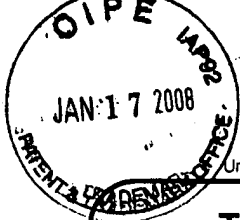
Dated: January 17, 2008

By: _____


Michael D. Wiggins
Reg. No. 34,754

HARNESS, DICKEY & PIERCE, P.L.C.
P.O. Box 828
Bloomfield Hills, Michigan 48303
(248) 641-1600

MDW/mp



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/646,601
Filing Date	08/21/2003
First Named Inventor	William Lo et al.
Art Unit	2154
Examiner Name	Mohammad A. Siddiqi
Attorney Docket Number	MP0290

Total Number of Pages in This Submission

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Comments on Statement of Reasons for Allowance; and Return receipt postcard.
--	--	---

Remarks

The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 08-0750.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Harness, Dickey & Pierce, P.L.C.		
Signature			
Printed name	Michael D. Wiggins		
Date	January 17, 2008	Reg. No.	34,754

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Maggie Purvis	Express Mail Label No.	EM 184 986 662 US (1/17/2008)
Signature		Date	January 17, 2008

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

EM 184 986 662 US